

**UNITED STATES BANKRUPTCY COURT**  
**FOR THE EASTERN DISTRICT OF MICHIGAN-SOUTHERN DIVISION**

In Re: Maude's Alabama BBQ LLC

Debtor.  
\_\_\_\_\_ /

Case No. 24-31583  
Chapter 11  
Judge Applebaum

**CASH FLOW FOR SMALL BUSINESS**

Dated: 8/26/24

Respectfully submitted,

/s/ George E. Jacobs  
George E. Jacobs (P36888)  
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Form **1120-S**Department of the Treasury  
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**Do not file this form unless the corporation has filed or  
is attaching Form 2553 to elect to be an S corporation.Go to [www.irs.gov/Form1120S](http://www.irs.gov/Form1120S) for instructions and the latest information.

OMB No. 1545-0123

**2023**

For calendar year 2023 or tax year beginning , ending

A S election effective date <b>02/28/19</b>	TYPE OR PRINT	Name <b>MAUDE'S ALABAMA BBQ, LLC</b> <b>MAUDE'S ALABAMA BBQ</b>	D Employer identification number <b>83-3777464</b>
B Business activity code number (see instructions) <b>722513</b>		Number, street, and room or suite no. If a P.O. box, see instructions. <b>2602 DAVISON RD</b>	E Date incorporated <b>02/28/2019</b>
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code <b>FLINT MI 48506</b>	F Total assets (see instructions) <b>\$ 598,763</b>

- G Is the corporation electing to be an S corporation beginning with this tax year? See instructions. ☐ Yes ☒ No
- H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination
- I Enter the number of shareholders who were shareholders during any part of the tax year **3**
- J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

**Caution:** Include only trade or business income and expenses on lines 1a through 22. See the instructions for more information.

Income	1a Gross receipts or sales	<b>1,130,042</b>	b Less Returns and allowances		c Balance	1c	<b>1,130,042</b>
	2 Cost of goods sold (attach Form 1125-A)					2	<b>415,133</b>
	3 Gross profit. Subtract line 2 from line 1c					3	<b>714,909</b>
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)					4	
	5 Other income (loss) (see instructions—attach statement)			<b>SEE STMT 1</b>		5	<b>2,014</b>
	6 Total income (loss). Add lines 3 through 5					6	<b>716,923</b>
Deductions (see instructions for limitations)	7 Compensation of officers (see instructions—attach Form 1125-E)					7	<b>75,962</b>
	8 Salaries and wages (less employment credits)					8	<b>266,618</b>
	9 Repairs and maintenance					9	<b>54,797</b>
	10 Bad debts					10	
	11 Rents					11	<b>16,511</b>
	12 Taxes and licenses					12	<b>111,241</b>
	13 Interest (see instructions)					13	<b>54,655</b>
	14 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)					14	<b>54,854</b>
	15 Depletion (Do not deduct oil and gas depletion.)					15	
	16 Advertising					16	<b>28,092</b>
	17 Pension, profit-sharing, etc., plans					17	
	18 Employee benefit programs					18	
Tax and Payments	19 Energy efficient commercial buildings deduction (attach Form 7205)					19	
	20 Other deductions (attach statement)			<b>SEE STMT 2</b>		20	<b>185,160</b>
	21 Total deductions. Add lines 7 through 20					21	<b>847,890</b>
	22 Ordinary business income (loss). Subtract line 21 from line 6					22	<b>-130,967</b>
	23a Excess net passive income or LIFO recapture tax (see instructions)	23a				23c	
	b Tax from Schedule D (Form 1120-S)	23b					
	c Add lines 23a and 23b (see instructions for additional taxes)						
	24a Current year's estimated tax payments & preceding year's overpayment credited to the current year	24a				24z	
	b Tax deposited with Form 7004	24b					
	c Credit for federal tax paid on fuels (attach Form 4136)	24c					
d Elective payment election amount from Form 3800	24d						
z Add lines 24a through 24d							
25 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>					25		
26 Amount owed. If line 24z is smaller than the total of lines 23c and 25, enter amount owed					26		
27 Overpayment. If line 24z is larger than the total of lines 23c and 25, enter amount overpaid					27		
28 Enter amount from line 27: Credited to 2024 estimated tax Refunded					28		

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No

Signature of officer <b>RONALD DARNELL</b>	Date	Title <b>PRESIDENT</b>
Print/Type preparer's name <b>PATRICIA SCHOFIELD</b>	Preparer's signature <b>PATRICIA SCHOFIELD</b>	Date <b>08/19/24</b>
Firm's name <b>SCHOFIELD ACCOUNTING &amp; TAX SERVICE</b>	Firm's EIN <b>20-4219156</b>	Check <input checked="" type="checkbox"/> if self-employed PTIN <b>P00149509</b>
Firm's address <b>11118 N JENNINGS RD</b> <b>CLIO, MI 48420</b>	Phone no. <b>810-252-5911</b>	

For Paperwork Reduction Act Notice, see separate instructions.

Form **1120-S** (2023)